

ACT, LAIs and other tx for SCZ

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Financial disclosures



A presentation in three parts

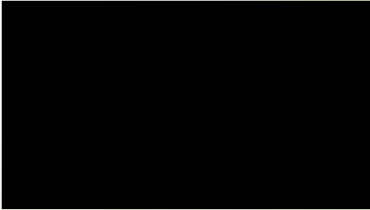

1. ACT Teams
2. LAIs
3. "Treatment"

Part I:
The Wonders, and Limitations,
of an ACT Team

Begin at the beginning

In what decade was the Assertive Community Treatment model introduced?

- A. 1960s
- B. 1970s
- C. 1980s
- D. 1990s
- E. 2000s



What makes ACT a class act?

- Team approach
- Services provided where they are needed
- Personalized care
- Time-unlimited support

What makes ACT a class act?

- Continuous care
- Flexible care
- Comprehensive care
- Services provided when they are needed

"We see the sickest of the sick, and our job is to keep them out of the hospital and in the community."

A day in the life

A typical day on an ACT team can include which of the following activities?

- A. Cleaning a patient's apartment while watching out for bugs
- B. Buying Daylight Donuts to bribe a patient to take their meds
- C. Going to Auto Zone to pick up motor oil for a patient's car
- D. Administering a patient's LAI behind a convenience store
- E. Having an appointment with a patient in the county jail



JBS Mental Health Authority



- **ProACT – Program for Assertive Community Treatment**
- 604 27th Street South
- Birmingham, AL 35233
- (205) 595-4555

Targets hard-to-reach individuals with SPMI

Psychiatrist, nurses, social workers, counselors, peer specialists, vocational specialists, substance abuse specialists

75% of services are out-of-office

BayPointe Hospital



- 5800 Southland Drive
- Mobile, AL 36693
- (251) 662-7974

Mobile

Multi-disciplinary

Deliver treatment and services in the location of the patient

Goal is to transition to a less-intensive type of treatment

Carastar Health

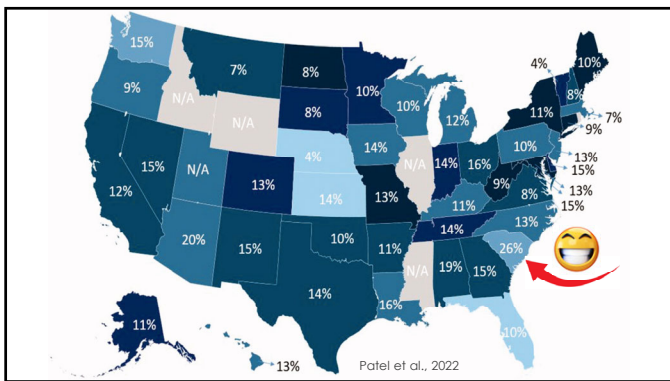


- **Assertive Community Treatment**
- 2140 Upper Wetumpka Rd
- Montgomery, AL 36107
- (334) 279-7830

Part II:
Are LAIs Lies?

Who's using them?

- Per 2018 Medicaid enrollment data, which state had the highest LAI utilization rate in patients diagnosed with schizophrenia?
- A. Alabama
- B. South Carolina
- C. Nebraska
- D. Arizona
- E. Mississippi (Thank God for)



The OG

- Fluphenazine decanoate



CENTER FOR DRUG EVALUATION AND RESEARCH

Approval Package for:

Application Number : 074795

**Trade Name :FLUPHENAZINE DECANOATE
INJECTION USP 25MG/ML**

Generic Name:Fluphenazine Decanoate Inj USP 25mg/ml

Sponsor : Gensia Laboratories, Inc.

Approval Date: September 10, 1996


Old school

- Fluphenazine decanoate - 1996



Middle school

- Haloperidol decanoate – 2000
- Risperdal Consta – 2003
- Invega Sustenna – 2009
- Zyprexa Relprevv – 2009



New school

- Abilify Maintena – 2013
- Invega Trinza – 2015
- Aristada – 2015
- Aristada Initio – 2018
- Perseis – 2018



New, new school

- Invega Hafyera – 2021
- Rykindo – 2023



Let's take a moment to discuss...

- When? Do you give your patients the LAI option?
- Efficacy
- Duration
- Insurance approval

But are they really better?

- 238 patients, about half with a scz diagnosis
- Fewer overall hospitalizations
- Fewer psychiatric hospitalizations
- About 1 in 2 required a switch between orals, while only 1 in 10 required a switch between LAIs
- Those on orals needed a switch about three times a year
- Those on LAIs needed a switch at most once a year

Kheloussi et al., 2022

Show me the money!

Patients on LAIs	But...
Younger (42yo vs 44yo)	More AP use (86% vs 76%)
Fewer comorbidities (0.9 vs 1.3)	More AP agents (2 vs 1.5)
Fewer MH dxes (9.2 vs 10)	More polypharmacy (21% vs 16%)

Pilon et al., 2017

Show me the money!

Those started on LAIs had

- Lower total healthcare costs
- Fewer medical services
- Fewer ED visits

But...

- More psychiatric hospitalizations
- More 1-day psychiatric admissions

Pilon et al., 2017

Show me the money!

- Higher odds of being adherent and persistent to therapy
- Fewer long-term care visits and home services
- Significantly lower medical costs that offset half the increase in pharmacy costs

Pilon et al., 2017

But what does the *patient* want?

- 60% of US patients preferred LAIs (vs 90% in Europe)
- 50% preferred 3-month over 1-month injection
- 60% preferred deltoid over gluteus
- "Easier," but for oral "I feel less embarrassed."
- "I don't have to think about taking my medicines"

Blackwood et al., 2020

Look ma, no pills (maybe?)

Oral overlap	No oral overlap needed
<ul style="list-style-type: none">▪ Invega▪ Maitena▪ Aristada▪ Risperdal Consta▪ Haldol dec▪ Prolixin dec	<ul style="list-style-type: none">▪ Invega▪ Perseris▪ Zyprexa Relprevv▪ Aristada Initio

VandenBerg, 2022

Don't just set it and forget it

Watch those kidneys	No kidney issues
<ul style="list-style-type: none">▪ Paliperidone▪ Risperidone	<ul style="list-style-type: none">▪ Aripiprazole▪ Olanzapine

VandenBerg, 2022

Part III:
The Diabolic Metabolic

- What should we be monitoring?

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Recommendations for metabolic risk factor monitoring in patients with severe mental illness or on antipsychotic medication

Risk factor	Timing of assessment				Ongoing monitoring ^a	
	Baseline	6 weeks	3 months	12 months	Quarterly ¹	Annually ¹
Personal and family history of diabetes, hypertension, or cardiovascular disease						
Smoking status, physical activity, diet ^b						
Weight, body mass index ^b						
Blood pressure ^b						
Fasting glucose or HbA1c ^c						
Lipid profile (fasting or nonfasting)						

¹In subsequent years of antipsychotic and in patients with severe mental illness.
^aOngoing quarterly and annual monitoring is appropriate when health indicators are within the normal range. More frequent monitoring is indicated when health indicators are out of range.
^bAssess regularly as part of general health maintenance.
^cHbA1c is usually more practical to obtain than fasting glucose but either can be used.

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Smoking status, physical activity, diet ²	X	X	X		X	
Weight, body mass index ³	X	X	X		X	
Blood pressure ⁴	X	X	X		X	
Fasting glucose or HbA1c ⁵						
Lipid profile (fasting or nonfasting)						

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Blood pressure ⁴	X	X	X		X	
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Smoking status, physical activity, diet ^b	X	X	X		X		
Weight, body mass index ^c	X	X	X		X		
Blood pressure ^d	X	X	X		X		
Fasting glucose or HbA1c ^e	X		X	X		X	
Lipid profile (fasting or nonfasting) ^f	X		X	X		X	

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- ### Proof that I didn't just make stuff up
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THANK YOU!

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